Name of Lead Agency	County of Santa Cruz, Health Services Agency, Alcohol and Drug Program
Location	Santa Cruz, CA
Title of Project	Treatment Alliance for Safe Children
Program Option	RPG 5-Year Grant; \$500,000 annually
Geographic Area and Congressional District Served	Central Coast of Santa Cruz Congressional District 17
Brief Program Description	The Treatment Alliance for Safe Children (TASC) project was a collaboration between Santa Cruz County Health Services Agency's Alcohol and Drug Program, Human Services Department's Family & Children's Services (Child Welfare Services), the Superior Court, and a network of community based service providers. TASC served families who resided in all regions of Santa Cruz County; and served an average of 81 adult clients, 112 children and 71 families a year.
	The Family Preservation Court (FPC), the central program in the TASC project, was a highly successful voluntary treatment court dedicated to assisting parents in addressing their substance abuse issues to increase the likelihood of either reunification with their children or to prevent removal of their children due to abuse and neglect. The Regional Partnership Grant (RPG) enabled the County to enhance and expand this original "Dependency Drug Court" to provide a continuum of intensive case management and individually tailored, culturally competent treatment and ancillary services.
Target Population	 The project targeted: Families that met the following criteria: Families residing in Santa Cruz County, California with methamphetamine or other drug abuse issues Families who volunteer to participate in the Family Preservation Court program Families with a child in out-of-home placement (Family Reunification) or families with court-ordered in-home placement (Family Maintenance) Families that have a child age 12 or under Parent needs a placement of Level II.1 (Intensive Outpatient Treatment) or higher, based on a comprehensive substance use assessment and application of American Society of Addiction Medicine patient placement criteria

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Participants Served	Children: 293
	Adults: 219
	Families: 189
Major Goals	Major program goals included:
	Implement Expanded and Enhanced Dependency Drug Court
	Improve Child Outcomes
	Improve Adult and Family/Relationship Outcomes
	Improve Regional Partnerships and Service Capacity
Key Major Program Services	Case Management and In-Home Services
	Intensive Case Management
	Family Group Decision Making/Family Case Conferencing
	Home Visits
	Family Therapy/Counseling
	Mental Health and Trauma Services for Adults
	Mental Health Services
	Trauma-Informed Services
	Substance Abuse Treatment for Adults
	Intensive Outpatient – Matrix Model
	Non-Intensive Outpatient or Other Step-Down
	Aftercare/Continuing Care/Recovery Community Support Services
	Specialized Outreach, Engagement and Retention
	Cognitive Behavioral Strategies - Motivational interviewing
	Co-location of Staff
	Peer/Parent Mentor
	Children's Services
	Early Intervention and Developmental Services
	Mental Health Counseling – Parent Child Interaction Therapy, Trauma Focused Cognitive Behavioral Therapy
	Family Treatment Drug Court/Dependency Drug Court
Partner Agencies and Organizations	Child Welfare
	Regional/County Child Welfare
	Substance Abuse
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	Regional/County Substance Abuse Agency
	Substance Abuse Treatment Agency
	Courts
	Family Treatment Drug Court (FTDC)
	Mental Health Services
	Regional/County Mental Health Agency
	Mental Health Service Provider
	Education
	Parenting Education/Services Provider
	Employment
	State/County Temporary Assistance for Needy Families (TANF) or Welfare Office
	Other Community and Child and Family Services
	Domestic Violence Services
	Other Evaluation and Training
	Evaluation (University-Affiliated or Other)
Evaluation	Quasi-experimental
Design and	Historical, Matched Population-Level
Comparison Group Type	
Performance Indicators	Safety
	The majority of children (84.5%) did not experience an occurrence of child maltreatment after enrollment in program services.
	Permanency
	Approximately three-quarters of the children in the home at time of enrollment remained in the home at case closure.
	The median length of stay in foster care for those reunified was significantly shorter for TASC (10.8 months) than comparison children (14.3 months).
	Recovery
	A total of 232 TASC (97.9%) and 23 comparison (95.8%) adults were admitted to substance abuse treatment.
	The median ¹ length of stay in treatment for those that completed treatment

¹ The *median* number of days is reported here, in contrast to the *mean*, as the median is considered a better measure of the typical length of stay for adults in the treatment sample, especially since the sample size for treatment discharges is small. Because the

	was significantly longer for TASC (364.0 median days or 12.0 months) than comparison adults (124.0 median days or 4.1 months). Well-Being
	Six children were born to TASC mothers while they were enrolled in the program and for all of the children no substances were detected at birth.
	Nearly all of the adults who needed received continuing care services (96.4%), parenting services (94.9%), dental services (87.6%), domestic violence services (87.3%), employment services (83.0%) and child care services (80.0%). Approximately three-quarters of the adults who needed received primary medical care (76.4%), transportation services (76.1%) and mental health services (71.8%).
Sustainability Status	The grantee reports serving fewer participants post-grant funding and a portion of the funding Child Welfare allocated for treatment of non-FPC clients is currently being used to help support the program. CalWORKs funding and California realignment funds that were allocated for the original dependency drug court are also being used.

mean is the arithmetic average of the entire range of possible values, it tends to be more sensitive to and affected by outliers, particularly very high values.